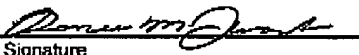


MAY 18 2006



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Lake Forest, California 92630

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	FILING DATE	09/20/2001
	FIRST NAMED INVENTOR	William B. Boyle, et al.
	ART UNIT	2616
	CONFIRMATION NO.	4046
	EXAMINER	Robert Chevalier
	ATTORNEY DOCKET NO.	K35A0978
TITLE	COMMUNICATING PROGRAM IDENTIFIERS FROM A DIGITAL VIDEO RECORDER (DVR) TO A SET TOP BOX (STB) INDEPENDENT OF WHEN THE STB DEMODULATES THE ASSOCIATED PROGRAM DATA	

ATTACHED WITH THIS SUBMISSION:

1. Transmittal Form (1 page)
2. Fee Transmittal Form (1 page)
3. Information Disclosure Statement / Form PTO/SB/08 (1 page), including one reference (29 pages)

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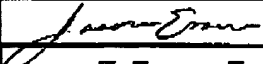
PTO/SB/21 (09-04)

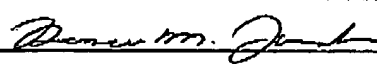
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/960,030
	Filing Date	09/20/2001
	First Named Inventor	William B. Boyle, et al.
	Art Unit	2616
	Examiner Name	Robert Chevalier
	Attorney Docket Number	K35A0978
Total Number of Pages in This Submission		

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): One reference (29 pages)
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Western Digital		
Signature			
Printed name	Jason T. Evans, Esq.		
Date	May 18, 2006	Reg. No.	57,862

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Signature			
Typed or printed name	Renee M. Franks	Date	May 18, 2006

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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL **For FY 2006**

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 180

Complete if Known

Application Number 09/960,030
Filing Date 09/20/2001
First Named Inventor William B. Boyle, et al.
Examiner Name Robert Chevalier
Art Unit 2616
Attorney Docket No. K35A0978

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify):
☒ Deposit Account Deposit Account Number 23-1209 Deposit Account Name: WESTERN DIGITAL

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

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FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180
Total Claims	Extra Claims	Fee (\$)
- 20 or HP =	x 50 =	Fee Paid (\$)
HP = highest number of total claims paid for, if greater than 20.		
Indep. Claims	Extra Claims	Fee (\$)
- 3 or HP =	x 200 =	Fee Paid (\$)
HP = highest number of independent claims paid for, if greater than 3.		

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(c)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
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- 100 = / 50 = (round up to a whole number) x =

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)
Other (e.g., late filing surcharge): Submission of Information Disclosure Statement (FC 1806) 180

SUBMITTED BY

Signature *Jason Evans* Registration No. (Attorney/Agent) 57,862 Telephone (949) 672-9474
Name (Print/Type) Jason T. Evans, Esq. Date May 18, 2006

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Substitute for form 1449/PTD

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(Use as many sheets as necessary)

Complete if Known

Application Number	09/960,030
Filing Date	09/20/2001
First Named Inventor	William B. Boyle, et al.
Art Unit	2616
Examiner Name	Robert Chevalier
Attorney Docket Number:	K35A0978

Sheet	1	of	1
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[illegible][illegible]

Examiner Signature		Date Considered	
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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. *Applicant's unique citation designation number (optional). *See Kinds Codes of USPTO Patent Documents at www.uspto.gov or MPEP 901.04. *Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). *For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. *Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST.16 if possible. *Applicant is to place a check mark here if English language Translation is attached.

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